IN THE SUPERIOR COURT III TIPPECANOE COUNTY, INDIANA

TIPPECANOE COUN	TY,
Plaintiff	
v.	CAUSE NO. 79D03
Parent/Defendant	
EMPLOYER NAME:	,
Employer	
	REQUEST FOR WAGE WITHHOLDING
I acknowledge that a ju	Igment of the Court has a remaining unpaid balance.
judgment, plus any cos	employer withhold money from each of my paychecks until the s and interest, is paid in full. I understand that I can revoke my request at any time if I provide written notice to my employer.
,	yer withhold \$ from my paycheck pay period (check one).
My name is:	
My Address is:	. '
My Phone Number is:	
My Social Security Nu	mber is:
The above-named emp Clerk, 301 Main Street	oyer shall send payroll deductions directly to the Tippecanoe County Lafayette, IN 47901.
The Tippecanoe Count interest, until paid in fu	Clerk shall apply payments toward the judgment, plus any costs and

I am employed a	at:
My Employer's	Address is:
My Employer's	Phone Number is:
My Employer's	FAX Number is:
employment agency	k through a temporary employment agency, list the name/address/phone number of the temporary and not where the agency has sent you to work. For example, if you are working at a factory ist the information for CTI since your payroll checks are issued by CTI.
	oyers, a new Request for Wage Withholding must be filed. Wage Withholding orders do not fer when you change employers.
I affirm under th request is volunt	te penalties of perjury that this information is true and accurate and that my tary.
Date:	Signaturé:
AGREEMENT (OF EMPLOYER:
The above-name	ed employer, by its duly authorized representative, does hereby agree to withhold
	wages as requested and to send payroll deductions to the Tippecanoe County
Clerk as instruct	ed.
Date:	Employer Signature
Date.	Employer Signature:
	Employer Printed Name
	Employer Printed Name:
So APPROVED	
So APPROVED	this day of
So APPROVED	
So APPROVED	this day of

Form - VWWO Updated 02.13.2013

Tippecanoe County Clerk